

PATENT APPLICATION FEE DETERMINATION RECORD  
Effective October 1, 2003

Application or Docket Number

10764222

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

|                                  |               |                          |
|----------------------------------|---------------|--------------------------|
| TOTAL CLAIMS                     | 19            |                          |
| FOR                              | NUMBER FILED  | NUMBER EXTRA             |
| TOTAL CHARGEABLE CLAIMS          | 19 minus 20 = | *                        |
| INDEPENDENT CLAIMS               | 3 minus 3 =   | *                        |
| MULTIPLE DEPENDENT CLAIM PRESENT |               | <input type="checkbox"/> |

\* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

| AMENDMENT A                                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA         |
|--|---|-------|---|--------------------------|
|  | Total                                     | Minus | **  | =                        |
| Independent                                    | *   | Minus | ***   | =                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |       |   | <input type="checkbox"/> |

SMALL ENTITY  
TYPE

OR OTHER THAN  
SMALL ENTITY

|           |        |
|-----------|--------|
| RATE      | Fee    |
| BASIC FEE | 385.00 |
| X\$ 9=    |        |
| X43=      |        |
| +145=     |        |
| TOTAL     |        |

|           |        |
|-----------|--------|
| RATE      | Fee    |
| BASIC FEE | 770.00 |
| X\$18=    |        |
| X86=      |        |
| +290=     |        |
| TOTAL     |        |

OTHER THAN  
SMALL ENTITY

|                    |                        |
|--------------------|------------------------|
| RATE               | ADDI-<br>TIONAL<br>FEE |
| X\$ 9=             |                        |
| X43=               |                        |
| +145=              |                        |
| TOTAL<br>ADDT. FEE |                        |

|                    |                        |
|--------------------|------------------------|
| RATE               | ADDI-<br>TIONAL<br>FEE |
| X\$18=             |                        |
| X86=               |                        |
| +290=              |                        |
| TOTAL<br>ADDT. FEE |                        |

(Column 1) (Column 2) (Column 3)

| AMENDMENT B                                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA         |
|--|---|-------|---|--------------------------|
|  | Total                                     | Minus | **  | =                        |
| Independent                                    | *   | Minus | ***   | =                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |       |   | <input type="checkbox"/> |

|                    |                        |
|--------------------|------------------------|
| RATE               | ADDI-<br>TIONAL<br>FEE |
| X\$ 9=             |                        |
| X43=               |                        |
| +145=              |                        |
| TOTAL<br>ADDT. FEE |                        |

|                    |                        |
|--------------------|------------------------|
| RATE               | ADDI-<br>TIONAL<br>FEE |
| X\$18=             |                        |
| X86=               |                        |
| +290=              |                        |
| TOTAL<br>ADDT. FEE |                        |

(Column 1) (Column 2) (Column 3)

| AMENDMENT C                                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA         |
|--|---|-------|---|--------------------------|
|  | Total                                     | Minus | **  | =                        |
| Independent                                    | *   | Minus | ***   | =                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |       |   | <input type="checkbox"/> |

|                    |                        |
|--------------------|------------------------|
| RATE               | ADDI-<br>TIONAL<br>FEE |
| X\$ 9=             |                        |
| X43=               |                        |
| +145=              |                        |
| TOTAL<br>ADDT. FEE |                        |

|                    |                        |
|--------------------|------------------------|
| RATE               | ADDI-<br>TIONAL<br>FEE |
| X\$18=             |                        |
| X86=               |                        |
| +290=              |                        |
| TOTAL<br>ADDT. FEE |                        |

- If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.